

FOOD ESTABLISHMENT TOBACCO LICENSE APPLICATION

Allow 10 days for processing.

Please use a separate form for each type of License Application.

www.	wi	chi	ta.	gov

City License 455 N. Main – 1 st Floor Wichita KS 67202 CITY LICENSE (316) 268-4553 ENVIRONMENTAL SERVICES (316) 268-8351			Date					
Check only one per application:			New_	Renew	al	New Owner		
Food Establishment Expires Annually July 31. Fee: Location for which permit is desired: Description of food establishment (grocery store, warehous								
Dates of Tempo (Temporary Lic	orary Operation cense for up to a maximum of 6 days in	n a cal	lendar year	·).				
Will hookahs as	Fee \$150.00 per year plus \$12.00 per yand/or tobacco for hookahs be sold and per of vending machines	l used i		ness location listed				
APPLICANT INFORM	MATION:							
Name				Phone Numb	er	<u> </u>		
Home Address						Zip		
BUSINESS INFORMA	ATION (location for which permit is de	lesired	<u></u>					
Business Name		-	<u>/</u>	Phone Numb	er			
Business Address						Zip		
Mailing Address						Zip	+	
OWNER INFORMAT	TON (List legal ownership: individual,	corp	oration, lir	nited partnership, 6	etc)			
Owner Name	2011 (E.S. 105m. 0	, • • • F	7440, -	Phone Numb				
Owner Address						Zip	<u> </u>	
MANAGER INFORM	ATION							
Manager Name				Phone Numb	er		- 	
Manager Address						Zip		
all rules and regulations	, the aboral information and answers herein coras set out in the Code of the City of Wall all rules and regulations prescribed by	ontaineo Vichita	ed are comp a. Furthern	nore, I hereby agre	addition, I	I have rea	ad and understand	
Signature of Applicant FOR OFFICIAL		Date AL USE ONLY						
	Approved		Disapproved			Date		
Environmental Services								
License #	Date	\dashv		Expiration	on Date			
Total fee		To	obacco Deca	al Numbers				